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B22C (Official Form 22C) (Chapter 13) (12/10)

According to the calculations required by this statement:

The applicable commitment period is 3 years.

		☐ The applicable commitment period is 3 years.
In re: JONES, ERIC		✓ The applicable commitment period is 5 years.
~	Debtor(s)	☑ Disposable income is determined under § 1325(b)(3).
Case Number:	(If known)	☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REP	ORT OF INCOME							
	a. [
1	the s mon	igures must reflect average monthly income receive ix calendar months prior to filing the bankruptcy of the before the filing. If the amount of monthly income divide the six-month total by six, and enter the research.	ase, ending on the last day of the ne varied during the six months, you	Column A Debtor's Income	Column B Spouse's Income					
2	Gro	ss wages, salary, tips, bonuses, overtime, comm	issions.	\$ 7,187.00	\$ 3,306.25					
3	a and one	me from the operation of a business, profession d enter the difference in the appropriate column(s) business, profession or farm, enter aggregate numb himent. Do not enter a number less than zero. Do r enses entered on Line b as a deduction in Part I	of Line 3. If you operate more than pers and provide details on an not include any part of the business							
	a.	Gross receipts	\$							
	b.	Ordinary and necessary operating expenses	\$							
	c.	Business income	Subtract Line b from Line a	\$	\$					
4	diffe									
	a.	Gross receipts	\$							
	b.	Ordinary and necessary operating expenses	\$							
	c.	Rent and other real property income	Subtract Line b from Line a	\$	\$					
5	Inte	rest, dividends, and royalties.		\$	\$					
6	Pens	sion and retirement income.		\$	\$					
7	expe that by th	amounts paid by another person or entity, on a enses of the debtor or the debtor's dependents, is purpose. Do not include alimony or separate mained debtor's spouse. Each regular payment should be nent is listed in Column A, do not report that payment should be necessarily as a series of the debtor's spouse.	ncluding child support paid for ntenance payments or amounts paid e reported in only one column; if a	\$	\$					

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			1			
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line However, if you contend that unemployment compensation received by you or your spowas a benefit under the Social Security Act, do not list the amount of such compensation Column A or B, but instead state the amount in the space below:	use				
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse \$		\$		\$	
9	Income from all other sources. Specify source and amount. If necessary, list additions sources on a separate page. Total and enter on Line 9. Do not include alimony or separatemaintenance payments paid by your spouse, but include all other payments of alim or separate maintenance. Do not include any benefits received under the Social Secur Act or payments received as a victim of a war crime, crime against humanity, or as a victor international or domestic terrorism. a. \$ b. \$	rate nony ity	\$		\$	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).		\$	7,187.00	\$	3,306.25
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.					
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT	r PEI	RIOL)		
12	Enter the amount from Line 11.				\$	10,493.25
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, Al that calculation of the commitment period under § 1325(b)(4) does not require inclusio your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that a regular basis for the household expenses of you or your dependents and specify, in the basis for excluding this income (such as payment of the spouse's tax liability or the spouse persons other than the debtor or the debtor's dependents) and the amount of income depurpose. If necessary, list additional adjustments on a separate page. If the conditions for adjustment do not apply, enter zero. a. b. c.	n of that was elines use's s	e inco NOT belov suppo so eac	ome of paid on w, the rt of h		
	Total and enter on Line 13.	'			\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.				\$	10,493.25
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Lin 12 and enter the result.	e 14 b	y the	number	\$	125,919.00
16	Applicable median family income. Enter the median family income for the applicable household size. (This information is available by family size at www.usdoj.gov/ust/ or to the bankruptcy court.)			rk of		
	a. Enter debtor's state of residence: Pennsylvania b. Enter debtor's h	ouseh	old si	ze: _ 3	\$	67,452.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ☐ The amount on Line 15 is less than the amount on Line 16. Check the box for "3 years" at the top of page 1 of this statement and continue with this statement. ✓ The amount on Line 15 is not less than the amount on Line 16. Check the box for "10 the amount on Line 15 is not less than the amount on Line 16. 	•	-			-
	period is 5 years" at the top of page 1 of this statement and continue with this state					

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18		the amount from Line 11.	2/10)				\$	10,493.25
19	total of expension Column than the necession application in the column than the necession of application in the column than the necession of application in the column than the necession of application in the necession of the necession of application in the necession of the nece	cal adjustment. If you are mar of any income listed in Line 10 ses of the debtor or the debtor on B income (such as payment ne debtor or the debtor's depersary, list additional adjustment ply, enter zero. Paycheck deductions	s dependents. Sp of the spouse's ta dents) and the ar	was NC ecify ir ax liabi nount c	T paid on a regular basis for the lines below the basis for lity or the spouse's support of income devoted to each pu	the household r excluding the of persons other urpose. If		
20		l and enter on Line 19.	5(h)(2) Calabra at	T : 1	0 f I i 10		\$	661.00
20		ent monthly income for § 132 alized current monthly incor					\$	9,832.25
21	12 and enter the result.							117,987.00
22	Applicable median family income. Enter the amount from Line 16.						\$	67,452.00
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI.							
		Part IV. CALCULA	FION OF DED	UCTI	ONS ALLOWED UND	ER § 707(b)(2)		
		Subpart A: Deduc	tions under Stan	dards	of the Internal Revenue Se	rvice (IRS)		
24A	currently be allowed as exemptions on your federal income tax return, plus the number of any additional						1,227.00	
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. Persons under 65 years of age a1. Allowance per person 60.00 Allowance per person 144.00							
	b1.	Number of persons Subtotal	180.00	b2.	Number of persons Subtotal	0.00		
	C1.	Subtotal	100.00	C2.	Subtotal	0.00	\$	180.00

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25A	Loca and U infor famil tax re	\$	595.00		
25B	the II information famile tax returned the A	I Standards: housing and utilities; mortgage/rent expense. Enter, it as Housing and Utilities Standards; mortgage/rent expense for your comation is available at www.usdoj.gov/ust/ or from the clerk of the bandy size consists of the number that would currently be allowed as exemple turn, plus the number of any additional dependents whom you support werage Monthly Payments for any debts secured by your home, as stated and enter the result in Line 25B. Do not enter an amount less	bunty and family size (this kruptcy court) (The applicable aptions on your federal income t.); enter on Line b the total of ted in Line 47; subtract Line b		
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,738.00		
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$ 2,915.00		
	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$	
26	for yo	our contention in the space below:		*	
	an ex	l Standards: transportation; vehicle operation/public transportat pense allowance in this category regardless of whether you pay the ex		\$	
	Chao	egardless of whether you use public transportation.			
	expe	k the number of vehicles for which you pay the operating expenses or nses are included as a contribution to your household expenses in Line			
27A	expe	k the number of vehicles for which you pay the operating expenses or			
27A	expend 0 If you Trans Local Statis	k the number of vehicles for which you pay the operating expenses or nses are included as a contribution to your household expenses in Line	om IRS Local Standards: rating Costs" amount from IRS ne applicable Metropolitan	\$	598.00

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`		ai Form 22C) (Chapter 13) (12/10)			
	which	al Standards: transportation ownership/lease expense; Vehicle 1. On you claim an ownership/lease expense. (You may not claim an ownerstwo vehicles.)			
		\checkmark 2 or more.			
28	Trans	r, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the bactal of the Average Monthly Payments for any debts secured by Vehic act Line b from Line a and enter the result in Line 28. Do not enter a	ankruptcy court); enter in Line bele 1, as stated in Line 47;		
	a.	IRS Transportation Standards, Ownership Costs	\$ 517.00		
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 346.17		
	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a		170.83
29	Enter Trans	Al Standards: transportation ownership/lease expense; Vehicle 2. Coked the "2 or more" Box in Line 28. Try, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the bactal of the Average Monthly Payments for any debts secured by Vehic act Line b from Line a and enter the result in Line 29. Do not enter a	S Local Standards: ankruptcy court); enter in Line b ele 2, as stated in Line 47;	1	
	a.	IRS Transportation Standards, Ownership Costs	\$ 517.00		
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$		
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a] \$	517.00
30	feder	er Necessary Expenses: taxes. Enter the total average monthly expensal, state, and local taxes, other than real estate and sales taxes, such as a social-security taxes, and Medicare taxes. Do not include real estate	s income taxes, self-employment	\$	1,437.00
31	dedu	er Necessary Expenses: involuntary deductions for employment. Expenses involuntary deductions for employment. Expenses in the second security of the second	ement contributions, union dues,	\$	
32	for te	er Necessary Expenses: life insurance. Enter total average monthly perm life insurance for yourself. Do not include premiums for insurance le life or for any other form of insurance.		\$	47.00
33	requi	er Necessary Expenses: court-ordered payments. Enter the total modered to pay pursuant to the order of a court or administrative agency, statests. Do not include payments on past due obligations included in	uch as spousal or child support	\$	
34	child empl	er Necessary Expenses: education for employment or for a physical. Enter the total average monthly amount that you actually expend for oyment and for education that is required for a physically or mentally n no public education providing similar services is available.	education that is a condition of	\$	
35	on ch	er Necessary Expenses: childcare. Enter the total average monthly an inildcare—such as baby-sitting, day care, nursery and preschool. Do not nents.		\$	
36	exper reiml	er Necessary Expenses: health care. Enter the total average monthly and on health care that is required for the health and welfare of yoursel bursed by insurance or paid by a health savings account, and that is in 24B. Do not include payments for health insurance or health savings	f or your dependents, that is not excess of the amount entered in	\$	
37	you a servi neces	er Necessary Expenses: telecommunication services. Enter the total actually pay for telecommunication services other than your basic home—such as pagers, call waiting, caller id, special long distance, or in ssary for your health and welfare or that of your dependents. Do not incted.	ne telephone and cell phone ternet service—to the extent	\$	

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38	Total Expenses Allowed under IRS Standards. Enter the total of	of Lines 24 through 37.	\$	4,771.83
	Subpart B: Additional Expense Ded Note: Do not include any expenses that yo			
	Health Insurance, Disability Insurance, and Health Savings A expenses in the categories set out in lines a-c below that are reaso spouse, or your dependents.			
	a. Health Insurance	\$		
	b. Disability Insurance	\$		
39	c. Health Savings Account	\$		
	Total and enter on Line 39		\$	
	If you do not actually expend this total amount, state your actu the space below: \$	nal total average monthly expenditures in		
40	Continued contributions to the care of household or family m monthly expenses that you will continue to pay for the reasonable elderly, chronically ill, or disabled member of your household or unable to pay for such expenses. Do not include payments listed	and necessary care and support of an member of your immediate family who is	\$	
41	Protection against family violence. Enter the total average reason you actually incur to maintain the safety of your family under the Services Act or other applicable federal law. The nature of these confidential by the court.	Family Violence Prevention and	\$	
42	Home energy costs. Enter the total average monthly amount, in e Local Standards for Housing and Utilities, that you actually experprovide your case trustee with documentation of your actual that the additional amount claimed is reasonable and necessar	nd for home energy costs. You must expenses, and you must demonstrate	\$	
43	Education expenses for dependent children under 18. Enter the actually incur, not to exceed \$147.92 per child, for attendance at a secondary school by your dependent children less than 18 years of trustee with documentation of your actual expenses, and you is reasonable and necessary and not already accounted for in	a private or public elementary or f age. You must provide your case must explain why the amount claimed	\$	
44	Additional food and clothing expense. Enter the total average melothing expenses exceed the combined allowances for food and contained Standards, not to exceed 5% of those combined allowances www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You additional amount claimed is reasonable and necessary.	clothing (apparel and services) in the IRS ces. (This information is available at	\$	
45	Charitable contributions. Enter the amount reasonably necessar charitable contributions in the form of cash or financial instrumen in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in exc	its to a charitable organization as defined	\$	
	income.		Ψ	

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			Subport C	: Deductions for De	ht Day	ment				
			ouppart C	: Deductions for De	ept Pay	ment			1	
	you o Payn the to follo	are payments on secured claims own, list the name of the creditor ment, and check whether the paymental of all amounts scheduled as a wing the filing of the bankruptcy. Enter the total of the Average N	, identify the nent include contractual case, divide	the property securing des taxes or insurance lly due to each Secunded by 60. If necessary	the del e. The A red Cred	bt, state the A Average Mor ditor in the 6	Average in the Pay 0 months	Monthly ment is		
47		Name of Creditor	Property	Securing the Debt		Average Monthly Payment	includ	s payment e taxes or nsurance?		
	a.	FANNIE MAE C-O IBM LNDF	Resider	nce	\$	2,915.00	▼ yes	s 🗌 no		
	b.	TOYOTA FINANCIAL SERVI	Automo	bile (1)	\$	346.17	☐ yes	s 🗹 no		
	c.				\$		☐ yes	s 🗌 no		
				Total: Ac	ld lines	a, b and c.			\$	3,261.17
	resid you i credi cure forec	er payments on secured claims. ence, a motor vehicle, or other properties and include in your deduction 1/2 tor in addition to the payments liamount would include any sums closure. List and total any such arrate page.	roperty ne 60th of an sted in Li in default	cessary for your suppy amount (the "cure ne 47, in order to ma that must be paid in	port or amount intain p order to	the support of ") that you nossession of avoid repos	of your donust pay the prop ssession	ependents, the perty. The		
48		Name of Creditor		Property Securing the Debt				Oth of the e Amount		
	a.	FANNIE MAE C-O IBM LNDR	BUSNS	Residence			\$	583.33		
	b.						\$			
	c.						\$			
						Total: Ac	ld lines a	a, b and c.	\$	583.33
49	such	nents on prepetition priority cl as priority tax, child support and ruptcy filing. Do not include cu	alimony	claims, for which you	u were l	iable at the t	ime of y		\$	
		pter 13 administrative expenses esulting administrative expense.	s. Multiply	y the amount in Line	a by the	e amount in l	Line b, a	nd enter		
	a.	Projected average monthly Cha	pter 13 pl	an payment.	\$	1,2	215.92			
50	b.	Current multiplier for your dist schedules issued by the Execut Trustees. (This information is a www.usdoj.gov/ust/ or from the court.)	ive Office vailable a	for United States	X		10.0%			
	c.	Average monthly administrativ case	e expense	of Chapter 13	Total:	Multiply Lin	nes a		\$	121.59
51	Total	Deductions for Debt Payment. En	iter the tot	al of Lines 47 through	gh 50.				\$	3,966.09
		·		: Total Deductions		ncome			I	
52	Tota	l of all deductions from income	. Enter th	e total of Lines 38, 4	6, and 5	51.			\$	8,737.92

B22C (Omei	al Form 22C) (Chapter 13) (12/10) Part V. DETERMINATION OF DISPOSABLE INCOME UNDER	R & 1325(b)(2)		
53	Tota	Il current monthly income. Enter the amount from Line 20.	(§ 1323(b)(2)	\$	9,832.25
54	Supj	port income. Enter the monthly average of any child support payments, foster care payility payments for a dependent child, reported in Part I, that you received in accordant cable nonbankruptcy law, to the extent reasonably necessary to be expended for such	ice with	\$	5,55225
55	from	lified retirement deductions. Enter the monthly total of (a) all amounts withheld by wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and yments of loans from retirement plans, as specified in § 362(b)(19).		\$	
56	Tota	l of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.		\$	8,737.92
	for win lir total	uction for special circumstances. If there are special circumstances that justify additional there is no reasonable alternative, describe the special circumstances and the respect acceptable. If necessary, list additional entries on a separate page. Total the expension Line 57. You must provide your case trustee with documentation of these expenses idea detailed explanation of the special circumstances that make such expenses necessonable.	es and enter the s and you must		
57		Nature of special circumstances	Amount of expense		
	a.		\$		
	b.		\$		
	c.		\$		
		Total: Add I	Lines a, b, and c	\$	
58		Add the amounts on Lines 54, 55, 5 the result.	56, and 57 and	\$	8,737.92
59	Mon	thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en	ter the result.	\$	1,094.33
		Part VI. ADDITIONAL EXPENSE CLAIMS			
	and w	r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.	from your curren	t month	ıly
		Expense Description	Monthly A	mount]
60	a.				
			\$		
	b.		\$		
	b.				
	 	Total: Add Lines a, b and	\$		
	 	Total: Add Lines a, b and Part VII. VERIFICATION	\$		
	c.		\$ \$ c \$	joint c	ase,
61	I decl	Part VII. VERIFICATION are under penalty of perjury that the information provided in this statement is true and	\$ \$ c \$	joint c	ase,